CUSTOM*FLEX*®ARTIFICIAL*IRIS*

Case and Images provided courtesy of Christopher Riemann, MD, Cincinnati Eye Institute

39 y/o patient with a history of congenital aniridia, Morcher artificial iris/IOL implant 15 years ago, a Dohlman type 2 Keratoprosthesis 8 years ago and a pars plana tube shunt, who presented with a luxation of the Morcher device with two fractured haptics after a blunt trauma. VA was fluctuating from from his baseline of 20/70 to CF at 2 feet and he complained of debilitating glare.

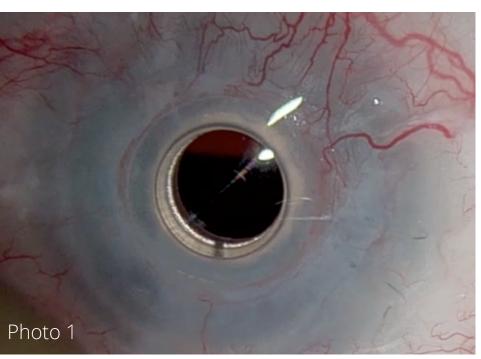


OF THE MONTH

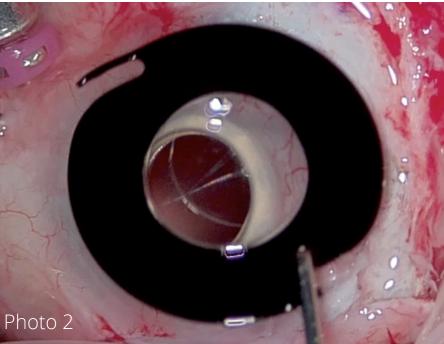
May 2022

Surgical Video provided:





Preop photo shows the luxed Morcher device behind the K-Pro.



The Morcher device is removed by way of a 12mm sclera-corneal incision. Note both haptics are fractured.



The black, With Fiber CUSTOM*FLEX*® ARTIFICIAL*IRIS* device is placed in front of a newly scleral sutured CZ70 PCIOL. Preplaced CV-8 Goretex sutures are sharing the same sclerotomes used to sclerally fixate the PCIOL.



1 year postoperatively the IOL and CUSTOMFLEX®ARTIFICIALIRIS device are in perfect position, the vision has returned to 20/70 baseline and his glare complaints are resolved. He subjectively states that his vision is better with less glare than with the Morcher device.